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Bib Data Sheet

CONFIRMATION NO. 4882

SERIAL NUMBER 09/389,085	FILING DATE 09/02/1999 RULE	CLASS 381	GROUP ART UNIT 2644	ATTORNEY DOCKET NO. UNME-0019-1
APPLICANTS JOE H. MULLINS, ALBUQUERQUE, NM;				
** CONTINUING DATA ***** This appln claims benefit of 60/098,998 09/03/1998 <i>JH</i>				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 10/05/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>JH</i> Verified and Acknowledged <i>JH</i> Examiner's Signature Initials		STATE OR COUNTRY NM	SHEETS DRAWING 7	TOTAL CLAIMS 20
			INDEPENDENT CLAIMS 2	
ADDRESS Ajay A Jagtiani Jagtiani + Gutttag 1036-A Democracy Lane Fairfax , VA 22030				
TITLE LOW FREQUENCY FEEDBACK CONTROLLED AUDIO SYSTEM				
FILING FEE RECEIVED 380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

SERIAL NUMBER 09/389,085	FILING DATE 09/02/99	CLASS 381	GROUP ART UNIT 2747	ATTORNEY DOCKET NO. UNME-0019-1
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APPLICANT

JOE H. MULLINS, ALBUQUERQUE, NM.

CONTINUING DOMESTIC DATA***

VERIFIED PROVISIONAL APPLICATION NO. 60/098,998 09/03/98

371 (NAT'L STAGE) DATA***

VERIFIED

FOREIGN APPLICATIONS***

VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/05/99 ** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NM	SHEETS DRAWING 7	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Initials _____ Initials _____					

ADDRESS

SEE CUSTOMER NUMBER: 022506

TITLE

LOW FREQUENCY FEEDBACK CONTROLLED AUDIO SYSTEM

FILING FEE RECEIVED

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